



North Yorkshire Safeguarding Adults Board

Notes of Meeting
Date & Time 08 September 2020 at 2pm
Venue: GoTo Video Conference

Name	Agency	Attended	Deputy Present	No Deputy
Sue Proctor (SPr)	Independent Chair	X		
Sarah Abram (SA)	NYCC Health and Adult Services	X		
Karen Agar (KA)	TEWV NHSFT	X		
Annette Anderson (AA)	North Yorkshire Police	X		
Ruth Andrews (RA)	Trading Standards			X
Rachel Bowes (RB)	NYCC Health and Adult Services		X	
Tony Clark (TC)	Richmondshire District Council	X		
Emma Dixon (ED)	NYCC Legal Services			X
Olwen Fisher (OF)	NHS NYCCG		X	
Jill Foster (JF)	Harrogate District NHSFT	X		
Marriane Franks (MF)	Army Welfare Service			X
Sheila Hall (SH)	NYCC Health and Adult Services		X	
Helen Hart (HH)	NHS AWCCG	X		
Chris Jones-King (CJK)	NYCC Health and Adult Services	X		
Elizabeth Moody (EM)	TEWV NHSFT		X	
Caroline O'Neill (CO'N)	Community First Yorkshire	X		
Erin Outram (EO)	NYCC Health and Adult Services		X	
James Parkes (JP)	NY Safeguarding Children's Partnership	X		
Christine Pearson (CP)	NHS NYCCG	X		
Sue Peckitt (SPe)	NHS NYCCG	X		
Beverley Proctor (BP)	Independent Care Group	X		
Lincoln Sargeant (LS)	NYCC Health and Adult Services		X	
Michelle Turner (MT)	NHS AWCCG		X	
Louise Wallace (LW)	NYCC Health and Adult Services	X		
Laura Watson (LWat)	NYCC Health and Adult Services	X		
Richard Webb (RW)	NYCC Health and Adult Services		X	
Dave Winspear (DW)	North Yorkshire Fire and Rescue Service	X		
Fran Wright (FW)	National Probation Service	X		

Also in Attendance

Name	Agency
Katie Needham	NYCC Health and Adult Services
Helen Vine	Care Quality Commission (CQC)
Karen Westhead	Care Quality Commission (CQC)
Ashleigh Parsons	Care Quality Commission (CQC)
Abigail Barron	NYCC Health and Adult Services

ITEM NO.	SUBJECT AND DISCUSSION	ACTION(S)
Item 1	Welcome / Introductions / Apologies for Absence	
	<p>Due to the government guidelines in relation to the COVID-19 (Coronavirus) pandemic, this SAB meeting took place as a video conference.</p> <p>Apologies for absence:</p> <ul style="list-style-type: none"> • Sheila Hall • Erin Outram • Richard Webb • Olwen Fisher • Elizabeth Moody • Michelle Turner • Lincoln Sargeant • Marrienne Franks <p>No declarations of interest</p> <p>Tony Clark attempted to join the meeting via GoTo but due to technical difficulties, was unable to join.</p>	
Item 2	CQC Presentation	
	<p>Helen Vine, Sector Delivery and Oversight Manager - Ambulances, Community Health & Hospices for CQC, delivered the key points from a presentation on Contemporary Safeguarding in Private Independent Ambulance Services that was shared with the Safeguarding Adults National Network (SANN) in July 2020.</p> <p>HV highlighted the main areas of focus from the following slides of the presentation, which was shared with partners prior to the meeting:</p> <p>Slide 7 highlights one thing that we can all do to make a difference is to promote the safe recruitment practice of bringing staff into this sector. There have been instances of recruiters / organisations not carrying out appropriate DBS checks for example. If we got this right, that would lower the impact of the other risks highlighted.</p> <p>Slide 12 focuses on the exacerbated risks because of Covid 19. The workforce in this sector tends to be zero hours' contract staff and many work across a number of organisations causing risks around infection control and staff wellbeing. Providers will defer employment / training responsibilities to substantive employer and this can sometimes lead to gaps or things 'slipping through the net'. There has been an increase in pressures around accessibility of safeguarding training during Covid and staff not understanding the changes and / or their responsibility.</p> <p>Slides 15 & 16 looks at sexual safety. Ambulance services are often delivered to people on a one to one basis who would not usually be vulnerable, but would be considered so in these circumstances. There have been convictions and ongoing cases in relation to this and this can be due to the risks around lack of robust recruitment and a lack of governance.</p>	

	<p>Other factors around this sector that combine to increase risk. These include. Providers often change their names and move around. There is a high turnover in registered managers which can make it difficult for CQC to engage with providers to support them.</p> <p>Partners were given the opportunity to ask HV questions:</p> <p>What practices are in place particularly around recruitment, training and making referrals? HV: Many providers, who may not be registered, operate over a large geographical footprint and there may be regional variations on training etc.</p> <p>How many providers are in North Yorkshire? HV: It is difficult to get an estimate, as there is no register for providers however there are approximately 300 providers in England. One of the biggest concentrations is in the North. In terms of registered providers, the figure is approximately 100, however due to some providers being registered in London but operating in Leeds for example, the approximate figure is not always representative of the true number.</p> <p>SPe commented that the CCGs don't directly commission these services. The CCG would look to those who commission ambulances to do their own checks. HV assured that it is only those services that are provided at temporary events that aren't regulated. Patient safety transport is regulated However, the CQC do have concerns around the governance of some providers. Mental Health Trusts / Community Trust & acute trusts are commissioning these services therefore there is an opportunity for a piece of work to get some feedback and assurance from TEWV and HDFT</p> <p>Are St Johns Ambulance and AGE UK registered? HV: CQC have no regulatory powers with St Johns Ambulance when they provide their services at events. However, they are a registered provider in urgent and emergency areas and therefore it would be assumed that they operated to their same standards in non-regulatory situations. AGE UK are not registered with CQC for transporting patients.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • HV to provide a list of those providers who are operating in the North of England 	
Item 3	Minutes of the last meeting held on 17th June and matters arising	
	<p>The minutes were accepted as a true reflection of the meeting</p> <p>It was acknowledged that producing the minutes in an easy read format set a good example as to how we want to be accessible and inclusive as a Board</p>	
Item 3	Action Log	
	<p>The action log was noted. SP asked that LWat review the action log and separate the completed actions from those which are ongoing and also those that have been paused due to the pandemic. This would make reviewing the log much more effective.</p> <p>Item 2020/07 point 2 – AA updated that the domestic abuse 'deep dive' was still ongoing. The deadline for this action is to be deferred owing to Covid. Following completion of the review, AA to bring an update to the Board in December.</p>	

Item 4	Response and Recovery to COVID-19	
	<p>As thorough updates from agencies were given at the Executive in August, SP asked that updates today were given on three specific areas:</p> <ul style="list-style-type: none"> • The care home situation in Selby, as discussed at the Executive • Care homes applying for financial hardship assistance • Public Health updates <p>CJK updated on the care home situation in Selby. A planned closure was already in place for one of the care settings however as a consequence of COVID-19 the home remained open.</p> <p>In terms of the second care setting, a number of safeguarding concerns were raised primarily around the nursing element of the home. The setting was registered for both nursing and residential care. Further concerns have been raised and NYCC have been supported by Vale of York (VoY) CCG in dealing with these. Concerns have included the inappropriate use of PPE as well as concerns around the cleanliness of the home. Concerns were also raised around residents' risk assessments and care plans not marrying up e.g. a risk being identified in an assessment but people not getting the care they needed in relation to that risk.</p> <p>CQC carried out an inspection and due to the risk around nursing, the decision was made to move everyone out of the care setting. This was carried out within a day. CQC subsequently went back to inspect the residential care in the home and due to its' findings CQC issued a notice for closure. NYCC negotiated an additional few days to support people to find alternative accommodation. People accessing residential care in the home were commissioned by City of York, NYCC and some residents were self-funded.</p> <p>Everyone was safely placed in alternative accommodation. Some people were admitted into hospital and the local authority have proactively continued to follow up on those people that were moved out of the home. A lessons learned piece of work has been commissioned to look at how the whole situation was managed.</p> <p>SPe updated on behalf of VoY CCG and gave assurance that the local authority and CCG are working closely with both CQC and the care home.</p> <p>CP: The manager of the care home is supporting the local authority with the ongoing safeguarding enquiries.</p> <p>JF asked, if we have to exit a care home quickly, is there standard guidance as to how the local authority and health can govern the response. SP asked that JF and CJK link in to discuss further outside of the meeting.</p> <p><u>Action(s) Agreed</u></p> <ul style="list-style-type: none"> • Any safeguarding that is highlighted from the Lessons Learned Review to be shared with the Learning & Review sub-group and communicated to all relevant partners <p>Abi Barron, Head of Service Development of NYCC, updated on the care home requests for assistance for financial hardship and the other support provided to care homes throughout the pandemic.</p> <p>There has been significant financial support provided to the care sector and additionally, work with the NYCC Care Home Liaison Officers through the resilience plan has helped to manage any deterioration of a care setting.</p> <p>NYCC has set up a supplier board to look at financial areas such as provider relief.</p> <p>To date, there has been one care setting that has successfully gone through the process and another successful hardship application. Another application has been identified.</p>	

	<p>There haven't been significant risks or concerns through this work however the levels of risk are alerted by the care home resilience work with provider colleagues. A care market strategic board has been set up to create a sustainable market for COVID-19 and the long term footprint. The supplier board looks at financial sustainability as well as supporting providers.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • AB to bring an update report to the SAB in December <p>KN provided an update on behalf of Public Health. There has been quite a jump in COVID-19 cases across North Yorkshire increasing to 147 with an average of 11 cases confirmed per day. Half of those testing positive for COVID-19 are 20-30 year olds. Public Health are working closely with Environmental Health colleagues and Public Health England to understand what is going on in terms of transmissions. PH are also working with comms colleagues to reinforce social distancing and hand hygiene messages. These messages are being tailored towards younger people. James Parkes advises that it would be helpful to use the term young adults rather than young people as that can suggest under 18s. KN agreed that was a very good point and would feed this back to the comms team for consideration. KN also confirmed that there were comms in place aimed at 18-30 year olds given the rise in this age group.</p> <p>Work is still ongoing in relation to outbreaks in the care home. PH are also working closely with the Safeguarding Advisory Groups (SAG) in relation to large scale events. More Public Health advice is needed as to whether these events are Covid secure. Guidance is being developed to help organisers / attendees understand whether events should go ahead.</p> <p>The Health Protection Regulations 2020 give the Council more powers to stop or close events / premises if they are deemed a risk however this requires a lot of work around assessing risk. The powers haven't been tried anywhere in the country as they are quite extreme and need to be signed off by the Secretary of State.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • KN to share the events guidance with CO'N / Community First <p>JP highlighted that as children begin to return to school the SCP anticipates a surge in contacts and referrals coming through for historical incidents that may have happened due to being in lockdown. This will be closely monitored.</p>	
Item 5	Report from Executive	
	The report from the Executive was noted.	
Item 7	Risk Register	
	The risk register was noted	
Item 8	SAB Development Day	
	<p>SP updated on arrangements for the SAB development day. The session will take place on Tuesday 24th November and most likely take place as a virtual event due to the ongoing restrictions in relation to Covid. The day will focus on areas such as:</p> <ul style="list-style-type: none"> • Learning from practice and adaptability during the pandemic and this will include looking at the future role of the LSPs • Local economics and the impact on the CVS sector as well as local businesses 	

	<ul style="list-style-type: none"> Public Health partners will facilitate a discussion in relation to emerging risks and inequalities during Covid-19 <p>SP requested that the virtual development day takes place via the Microsoft Teams platform as this has the feature of breakout rooms away from the main session and will allow for different discussions to take place throughout the day.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> LWat to link in with Health partners to set up the development day session via MS Teams LW to link in with Public Health to ensure local economics is linked into the facilitated discussion 	
Item 9	DS Delivery Report	
	<p>The DS delivery report was noted and LW asked that the SAB approves the report for publication on the NYSAB website.</p> <p>SPr asked for the following:</p> <ul style="list-style-type: none"> That the report is proof read for consistency and by a partner who has not been heavily involved in the case to ensure it is clear To provide an explanation for groups / meetings that others e.g. Consortium Group That once the report has been reviewed and amended, that LW shares it with Richard Webb ahead of publication on the NYSAB website. <p>The SAB agreed for this delivery report to be published once the agreed amendments have been made.</p> <p>The action plan will be monitored by the Learning and Review group and any further updates will be shared via the quarterly LAR update report to the Executive.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> Update the report with the amendments highlighted LWat to share the report with Cara Nimmo for proof reading LW to share the updated report with Richard Webb for comment before publication Publish the delivery report on the NYSAB website once amendments have been made 	
Item 10	SAR 'Ian' Delivery Report	
	<p>The SAR 'Ian' delivery report was noted and LW asked that the SAB approves the report for publication on the NYSAB website.</p> <p>The SAB agreed that the report could be published on the website.</p> <p>LW assured that any further action from the plan will be monitored by the Learning and Review group.</p> <p>LW also presented the 7-minute briefing for SAR 'Ian'.</p> <p>The SAB approved for this to be distributed following some slight amendments.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> Publish the delivery report on the NYSAB website once amendments have been made Circulate and publish the 7-minute briefing once amended Follow up the status of the Information Sharing Agreement with the HAS Legal team and NYCC Data Governance team 	
Item 11	Update on improving outcomes for people with complex needs	
	<p>SPE provided a verbal update on improving outcomes for people with complex needs following a presentation given to the Executive in May 2019 and highlighted the following areas:</p>	

	<ul style="list-style-type: none"> • Metrics are unavailable as it has been difficult to gather these due to the current pandemic and subsequent restrictions. • Assurance was give that the multi-agency tasking meeting is running regularly. • There are now dedicated points of contact for all of the agencies • Support networks are in place for those most vulnerable adults if this would and this will help to prevent these adults bouncing between services • Strategy meetings are held to talk about those with the most complex needs • The service is looking to pilot the sharing of clinical records between primary care and substance misuse providers to ensure a more effective and joined up multi agency approach • A piece of positive work to highlight is that which involved 2 individuals who regularly attend Scarborough ED. • One individual s is particularly vulnerable and the work carried out highlighted a positive approach from TEWV, CCG and the acute hospital. • It is felt that the service is working well and all agencies involved would like it to be rolled out further and plans are in place to look at how this can happen. SPe will keep the Board updated in relation to further roll out of the service. <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • SPe to provide a further update, with metrics, to the Board in December 	
Item 12	Primary Care Network	
	<p>SPe provided a verbal update on the Primary Care Network and highlighted the following:</p> <ul style="list-style-type: none"> • The PCN is now a year old and GP practices have come together to create a 30,000 – 50,000 practice list • This enables the networks to have structure and focus on population health management • Understandably, all networks across North Yorkshire are at different stages due to many factors such as size and demand. • The networks are working to support and provide an enhanced service for care homes. • Every care home has a named clinical lead and they work with the care homes to provide assurance as to how the services they provide will be coordinated. This has enhanced the way they work together. <p>CON raised the topic of social prescribing. The CVS has done a lot of work about this approach with referrals coming out of the GP practices. The CVS are in the process of launching a social prescribing guidance and this may be a beneficial resource to share throughout the Primary Care Network.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • CON to share the finalised social prescribing guidance with SPe 	
Item 13	PIPOT Update	
	<p>The PIPOT update was noted and CJK highlighted the following. The PIPOT policy was one of the pieces of work put on hold due to Covid however a task and finish group is now being pulled together to finalise the policy. The policy will be circulated ahead of sign off for comments and then brought to the SAB in December for approval.</p> <p>CON raised the situation around providing debt advice for people, particularly during the pandemic.</p>	

	<p>There are concerns around the scams that are taking place around finances and the local citizens advice bureau has been overwhelmed with the number of people contacting them for advice.</p> <p>CON advised that there is a local resilience forum which brings different agencies together around information and guidance around debt advice is shared. It is something to be aware of, particularly around those who are experiencing financial inequality.</p> <p>SP asked that LW picks this up with KN as something to think about for the SAB development day</p> <p>CJK advised that the SAB website shares more information with regards to keeping safe online and financial scams</p> <p>LWat advised that the SAB has linked in with a number of organisations to share information on staying safe online, particularly around financial scams.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • LWat to link in with Ruth Andrews at Trading Standards to ensure the most up to date information is being shared by the SAB. 	
Item 14	LeDeR Update	
	<p>The position statement was noted and CP highlighted the following:</p> <ul style="list-style-type: none"> • NHS England have completed all priority reviews • A specialist practitioner has been recruited • A number of reviews will be outsourced to get ahead of the curve • The local annual report will be signed off week commencing 07/09/20 and this will be circulated with the SAB in advance of it being shared with the Board in December. <p>SP noted that the report identified a particular serious point to highlight. A lot of concerns have been raised around the inequalities Covid has identified and it is inevitable that a lot of the focus has been around BAME groups and the affect Covid has had on them however the biggest cause of death for adults with learning disabilities is respiratory issues resulting in people dying early, which has been exacerbated by Covid</p> <p>SPe supported that comments that had been made and updated that nationally the number of those with a learning disability who access annual health checks has fallen because of the restrictions during the pandemic. It has highlighted that agencies need to look at how other reviews can be used and co-ordinated to feed in to these annual checks.</p>	
Item 15	Joint Engagement and Communication Strategy	
	<p>The Joint Engagement and Comms Strategy was noted.</p> <p>LWat asked the SAB for approval to implement the strategy once it has been signed off by the Safeguarding Children’s Partnership (CSP) and Community Safety Partnership (CSP)</p> <p>The SAB agreed and highlighted what a beneficial piece of work this was to move forward with engagement and communications and thanked LWat, SCP and CSP representatives for the work that had gone into this.</p> <p>LWat presented the SAB Engagement Plan and asked the Board for approval to carry out the engagement work highlighted in the plan on behalf of the SAB.</p> <p>The SAB agreed and thanked LWat for the work that has gone in to the plan.</p>	
Item 16	Annual Report	

	<p>The Annual Report was noted LWat thanked partners for providing their information and asked the SAB for approval to send the final draft report to the design team in readiness for publication on Monday 5th October</p> <p>The SAB agreed to this and thanked LWat for putting the report together.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • LWat to send the final draft of the SAB report to the design team and publish on Monday 5th October 	
Item 17	Current Issues	
	<p>AA updated that all 43 police forces are to be inspected in relation to Covid-19. This will mostly self-assessment but will also involve a deep dive to help in identifying areas of learning. The full report is due in January 2021 and this will be shared with the SAB.</p> <p>DW updated that the HMICFRS will be coming into NYFRS in November to review Covid related activities and this may include some areas around safeguarding. DW will feedback any findings that the SAB should be aware of.</p> <p>CJK: Achieved CCG trajectory for 14 people to be discharged people. Highlight really good work in the community</p> <p>JP asked if the SAB and SCP will be having a joint board day as was held in June 2019? This will be discussed at the Executive in November.</p> <p>SP shared an update in relation to Ampleforth. A Director of Safeguarding has been appointed and has started a piece of work reviewing and creating policies around safeguarding. He contacted SP and asked for any comments in support of revision of the policies as well as looking at any opportunity for them to have access around training for their staff</p> <p>JP: From a SCP perspective, there have been a number of concerns highlighted through Ampleforth. JP recommended that it would be beneficial to have a conversation with Heather Pearson, Children’s Safeguarding Unit Manager, and Allan Harder of NYP, as they have had a lot of involvement with Ampleforth.</p> <p>SP suggested that a conversation is arranged for herself, SH, SP and JP to discuss with Jim what support and assistance can be offered. Following this conversation, SP and / or JP will link in with Maggie Atkinson, Chair of the SCP.</p> <p>CON offered to share information relating to the training that would be on offer for Ampleforth.</p> <p>Action(s) Agreed</p> <ul style="list-style-type: none"> • SA / LWat to arrange a meeting with Jim Hopkinson, SH, SP and JP • CON to send training information with LWat / SA to share with Ampleforth 	
Calendar of Meetings		
	<ul style="list-style-type: none"> • Wednesday 16 December, 2.00pm, GoTo Video Conference • Wednesday March, 2.00pm, TBC • Wednesday June, 2.00pm, TBC • Wednesday September, 2.00pm, TBC • Wednesday December, 2.00pm, TBC 	

